



Vehicle/Vessel Disclosure Agreement Application

Use this form to apply for access to vehicle/vessel records or information. Once completed, mail or fax it to:

Public Disclosure
Department of Licensing
PO Box 2957
Olympia WA 98507-2957

Fax: (360) 570-7895

Please allow 14 business days to process and respond to your request.

We are committed to protecting personal information. There is no guarantee you will be provided the information. We release information in accordance with the federal Driver Privacy Protection Act (DPPA), and Washington State laws. The DPPA restricts redisclosure of personal information obtained from vehicle records. An authorized recipient may only redisclose information for a permitted use.

1 PRINT OR TYPE Method of access you are requesting			
<input checked="" type="checkbox"/> Internet Vehicle/Vessel Information Processing System (IVIPS) (<i>Individual record inquiries</i>) (360) 359-4001			
<input type="checkbox"/> Secure data transfer (360) 902-3673			
<input type="checkbox"/> Electronic Lender Transaction (ELT) (360) 902-3708 Service bureau name: _____			
Company/Agency name Washington Fugitive Investigations			
Contact name W. Tom McLinn	(Area code) Telephone number (253) 732-8250	(Area code) Fax number (253) 383-7160	
Contact name 2 (if applicable) Frank Davalos	(Area code) Telephone number (253) 732-0511	email frank_davalos@wfinv.net	
Contact name 3 (if applicable)	(Area code) Telephone number	email	
Physical address of business (Number and street) 513 S. 9th St.			
City Tacoma		State WA	ZIP code 98402
Mailing address of business (if different) 1000 Aviara Pkwy - Ste 300			
City Carlsbad		State CA	ZIP code 92011
email william_mclinn@wfinv.net		website	
You are required to provide one of the items below.			
Tax Identification Number (TIN) _____			
Federal Employer Identification Number (EIN) _____			
Washington State Unified Business Identifier (UBI) 603 241 027			

Agency Use Only			
Account number _____		<input type="checkbox"/> New account <input type="checkbox"/> Renewal <input type="checkbox"/> Reapply	
<input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Cancelled <input type="checkbox"/> Misuse			

2 Check all that apply to you and/or your business

- | | | |
|--|---|--|
| <input type="checkbox"/> Attorney | <input type="checkbox"/> Lien service | <input type="checkbox"/> Service bureau for another business
Provide business name: _____ |
| <input type="checkbox"/> Auction | <input type="checkbox"/> Marina | |
| <input type="checkbox"/> Auto manufacturer or agent | <input type="checkbox"/> Neighborhood block watch | <input type="checkbox"/> Storage facility |
| <input checked="" type="checkbox"/> Bail bonds | <input type="checkbox"/> Newspaper or media | <input type="checkbox"/> Title/Escrow |
| <input type="checkbox"/> Bank or financing firm | <input type="checkbox"/> Non-profit organization | <input type="checkbox"/> Toll facility |
| <input type="checkbox"/> Business | <input type="checkbox"/> Parking enforcement | <input type="checkbox"/> Towing company |
| <input type="checkbox"/> Commercial parking company | <input type="checkbox"/> Private investigator | <input type="checkbox"/> Transporter |
| <input type="checkbox"/> Credit union | <input type="checkbox"/> Process server | <input type="checkbox"/> Union (non-profit) |
| <input type="checkbox"/> Data broker/Reseller | <input type="checkbox"/> Property mgmt. - Government | <input type="checkbox"/> Vehicle/Vessel dealer |
| <input type="checkbox"/> Debt recovery/Collection | <input type="checkbox"/> Property mgmt. - Private | <input type="checkbox"/> I represent a business that will
provide information to another party
Provide business name(s): _____ |
| <input type="checkbox"/> Employer/Prospective employer | <input type="checkbox"/> Repossession service | |
| <input type="checkbox"/> Government | <input type="checkbox"/> Retail/Store | <input type="checkbox"/> Other (explain) _____ |
| <input type="checkbox"/> Guardianship/Trustee service | <input type="checkbox"/> School - Private | |
| <input type="checkbox"/> Home owner association | <input type="checkbox"/> School - Public | |
| <input type="checkbox"/> Hospital | <input type="checkbox"/> Scrap processor or wrecker | |
| <input type="checkbox"/> Hulk hauler | <input type="checkbox"/> Security services - Government | |
| <input type="checkbox"/> Insurance company/agent | <input type="checkbox"/> Security services - Private | |

3 Provide a detailed explanation of your primary business activity (exactly what your business does).

WFI is contracted w/ Aladdin Bail Bonds to investigate and recover/apprehend fugitives that have missed court and/or absconded.

4 Explain in detail why you need vehicle/vessel information. Give examples. Attach additional pages if necessary.

In some cases, being able to verify a registered owners address, or a vehicle at a location can lead us to a known defendant and/or indemnitor.

5 Redisclosure and/or selling of information

Will you redisclose or sell the information to anyone else? ☐ Yes ☒ No

If yes, which will you do? ☐ Sell ☐ Provide to others

If yes, to whom will you provide the information? Be specific, list all recipients.

None

If yes, how do you ensure they have a permitted use under the DPPA and Washington state law? Be specific.

None

If yes, how will you supply the information? Describe.

None

6 Owner contact

Will you contact the vehicle/vessel owner? ☒ Yes ☐ No

Unsolicited business contact for commercial purposes is strictly prohibited.

If yes, how is contact made? Describe.

Contact is usually made in person. We then properly identify ourselves and the purpose for the contact.

If yes, describe or provide an example of why you would contact them.

It's not always necessary to contact every owner. Only if the informatin leads us to the location of the defendant or indemnitor we're searching for, in which would lead to the arrest of the person sought.

7 Check all that apply

☒ **I represent a Washington State business.** Attach legible copies of:

- your current business license.
- any/all professional licenses that you possess.

☐ **I represent a business outside Washington State.** If your business is not required to be licensed in the State of Washington, attach a legible copy of either:

- your current business license.
- a letter with a signature of the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN).

☐ **I am a process server.** Attach legible copies of:

- your current business license.
- any/all professional licenses that you possess.
- registration for county jurisdiction(s).

☐ **I represent a government agency.** Attach a statement that the information you receive will be used solely for carrying out official agency functions. Print agency name:

☐ **I represent a non-profit organization or corporation.**

1. Attach a legible copy of one of the following:

- Your Articles of Incorporation, filed with the Secretary of State
- Your Tax Exempt Status from the Internal Revenue Services (501)(c)(3)
- Other documents reviewed and approved by the Department of Licensing Public Records Officer

2. Submit a letter with a signature of the business owner or authorized representative indicating you are their agent.

☐ **I am an attorney.*** Attach legible copies of:

- your current business license.
- your current bar card.

☐ **I am a private investigator.*** Attach legible copies of:

- your current Private Investigator license.
- your current business license.

***Whenever the name or address of an individual vehicle owner is provided to an attorney or private investigator, we will notify the vehicle owner that the information has been provided. RCW 46.12.635(4)**

8 Answer the following

Have you attached all the required documents that apply to this Vehicle/Vessel Disclosure Agreement Application?

☒ Yes ☐ No

Do you agree not to divulge any of the information we provide you to any third party that has not been disclosed on this Agreement Application?

☒ Yes ☐ No

Do you agree not to use the information for any purpose other than what is stated on this Agreement Application, or approved by us, not to sell the information, and that the information will not be used for commercial purposes by you or by any other individual or organization?

☒ Yes ☐ No

Do you agree not to use, or facilitate the use of, the information for the purpose of making unsolicited business contact with a person named in the disclosed information? "Unsolicited business contact" means a contact that is intended to result in, or promote the sale of any goods or services to a person named in the disclosed information.

☒ Yes ☐ No

Knowingly making a false statement or concealing a material fact required in this request or making false representation to obtain any personal information from an individual's motor vehicle record is subject to federal criminal fines under the DPPA and RCW 46.12.640

I declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

W. Tom McLinn - #224

PRINT Name

Director - WFI Operations

Title

513 S. 9th St.

Address

Tacoma, WA -98402-

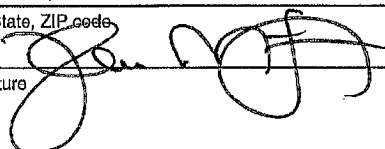
City, State, ZIP code

9.10.14 / Tacoma, WA

Date and place

X

Signature



Federal Driver Privacy Protection Act (DPPA) 18 U.S.C. §2721 through §2725
Washington State laws RCW 42.56, RCW 46.12, RCW 47, WAC 308-10, and WAC 308-93



"Working together to
fund Washington's future"

ABOUT US | CONTACT US
Español

login
register

Search

Home

DOING BUSINESS | REGISTER MY BUSINESS | LOOKUP BUSINESS INFORMATION

Back to search results

File & pay taxes

If "Non-revenue" appears after Tax Registration Number, the account is not registered with the Department of Revenue.
However, it may be registered with other agencies in the state.

Doing business

Business types

Register my business

My account

Audits

Find taxes & rates

Workshops & education

Get a form or publication

Find a law or rule

We need your help.

Take a 30 sec survey



Washington State Department of Revenue State Business Records Database Detail

TAX REGISTRATION NO: 603241027	ACCOUNT OPENED: 10/01/2012 12:00:00 AM
UBI: 603241027	ACCOUNT CLOSED: OPEN
ENTITY NAME: WASHINGTON FUGITIVE INVESTIGATIONS LLC	
BUSINESS NAME: WASHINGTON FUGITIVE INVESTIGATIONS	
MAILING ADDRESS: 1000 AVIARA DR STE 300 CARLSBAD, CA 92011-4218	BUSINESS LOCATION: 513 S 9TH ST TACOMA, WA 98402-5601
ENTITY TYPE: LIMITED LIABILITY	RESELLER PERMIT NO: N/A
NAICS CODE: 561611	PERMIT EFFECTIVE: N/A
NAICS DEFINITION: INVESTIGATION SERVICES	PERMIT EXPIRES: N/A

FOR NON-COMMERCIAL USE ONLY

09/10/2014 3:18 PM

CONTACT US | ABOUT US | QUESTIONS & ANSWERS | PRINTER FRIENDLY | CAREERS



Español | Русский | 繁體中文 | Tagalog | Tiếng Việt | 漢語

Your Privacy | ©2010 WASHINGTON STATE DEPARTMENT OF REVENUE AND ITS LICENSORS. ALL RIGHTS RESERVED.

Access Washington

Voter registration assistance (SECRETARY OF STATE)

- [Contact us](#)
- [Forms](#)
- [About us](#)

- [Home](#)
- [Start your business](#)
- [Change or update your business information](#)
- [How to renew your license](#)

Search Business Licenses

License Information:

Entity Name: WASHINGTON FUGITIVE INVESTIGATIONS, LLC
Business Name: WASHINGTON FUGITIVE INVESTIGATIONS, LLC
License Type: Washington State Business
Entity Type: Limited Liability Company
UBI: 603241027 Business ID:001 Location ID:0001
Status: To check the status of this company, go to [Secretary of State](#) and [Department of Revenue](#).

Location Address:
513 S 9TH ST
TACOMA, WA, 98402-5601

Mailing Address:
1000 AVIARA DR STE 300
CARLSBAD, CA, 92011-4218

Registered Trade Names:

WASHINGTON FUGITIVE INVESTIGATIONS,
LLC

Status

Active

Expires

N/A

First Issued

12/06/2012

Gover

TRITON
HERBEI
JOHN V
LELANE
PATRIC
ROBER

[New Search](#)

This site is limited to searching for business licenses issued through the Washington State Business Licensing Service.

- [Contact us](#)
- [Forms](#)
- [About us](#)
- [Privacy](#)

©2011 Washington State Department of Revenue and its licensors. All rights reserved.



STATE OF WASHINGTON

DEPARTMENT OF LICENSING – BUSINESS AND PROFESSIONS DIVISION

THIS CERTIFIES THAT THE PERSON NAMED HEREON IS AUTHORIZED, AS PROVIDED BY LAW, AS A



BAIL BOND RECOVERY AGENT

WILLIAM T MCLINN
767 MARKET ST
TACOMA WA 98402

Cert/Lic No.

224

Issued Date

02/27/2009

Expiration Date

01/16/2015

Pat Kohler

Pat Kohler, Director

L-630-159 (R/6/13)

STATE OF WASHINGTON

DEPARTMENT OF LICENSING – BUSINESS AND PROFESSIONS DIVISION

THIS CERTIFIES THAT THE PERSON NAMED HEREON IS AUTHORIZED, AS PROVIDED BY LAW, AS A



BAIL BOND RECOVERY AGENT

FRANK X DAVAIOS
513 S 9TH ST
TACOMA WA 98402

Cert/Lic No.

259

Issued Date

10/01/2009

Expiration Date

10/01/2014

John Hilt

Director

-630-159 (R/2/04)